

**Bayfield County  
Planning and Zoning Dept.  
PO Box 58  
Washburn, WI 54891  
(715) 373-6138**

RECEIVED  
DARTMOUTH COLLEGE  
JUN 15 2017

Permit #:	17-0324
Date:	8-1-17
Amount Paid:	\$50. - 747-
Refund:	

~~Bayfield Co. Zoning Dept.  
APPLICANT.~~

<input type="checkbox"/> Shoreland →	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermitent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline : _____ feet	Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input checked="" type="checkbox"/> Non-Shoreland	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline : _____ feet		

Value at Time of Completion * include donated time & material	Project	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System is on the property?	Water
\$ _____	<input type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> _____	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: _____	<input type="checkbox"/> _____
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement		<input type="checkbox"/> _____	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement		<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	
	<input type="checkbox"/> _____	<input type="checkbox"/> Foundation			<input type="checkbox"/> Compost Toilet	
	<input type="checkbox"/> _____	<input type="checkbox"/> _____			<input type="checkbox"/> None	

Existing Structure: (if permit being applied for is relevant to it)	Length:	Width:	Height:
Proposed Construction:	Length:	Width:	Height:

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	(      X      )	
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	(      X      )	
		with Loft	(      X      )	
		with a Porch	(      X      )	
		with (2 <sup>nd</sup> ) Porch	(      X      )	
		with a Deck	(      X      )	
Commercial Use		with (2 <sup>nd</sup> ) Deck	(      X      )	
		with Attached Garage	(      X      )	
	<input type="checkbox"/>	Bunkhouse w/ ( <input type="checkbox"/> sanitary, <u>or</u> <input type="checkbox"/> sleeping quarters, <u>or</u> <input type="checkbox"/> cooking & food prep facilities)	(      X      )	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	(      X      )	
Municipal Use	<input type="checkbox"/>	Addition/Alteration (specify) _____	(      X      )	
	<input type="checkbox"/>	Accessory Building (specify) _____	(      X      )	
	<input type="checkbox"/>	Accessory Building Addition/Alteration (specify) _____	(      X      )	
	<input type="checkbox"/>	Special Use: (explain) _____	(      X      )	
	<input checked="" type="checkbox"/>	Conditional Use: (explain) <u>Rock Crushing Operation</u>	(      X      )	
	<input type="checkbox"/>	Other: (explain) _____	(      X      )	

Owner(s) Thoma 707- Durine, Clerk  
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: \_\_\_\_\_

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

**Address to send permit**

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

If you recently purchased the property send your Recorded Deed



Draw or Sketch your Property (regardless of what you are applying for)

- (1) Show Location of: **Proposed Construction**  
(2) Show / Indicate: North (N) on Plot Plan  
(3) Show Location of (\*): (\*) **Driveway** and (\*) **Frontage Road** (Name Frontage Road)  
(4) Show: All Existing Structures on your Property  
(5) Show: (\*) **Well (W)**; (\*) **Septic Tank (ST)**; (\*) **Drain Field (DF)**; (\*) **Holding Tank (HT)** and/or (\*) **Privy (P)**  
(6) Show any (\*): (\*) **Lake**; (\*) **River**; (\*) **Stream/Creek**; or (\*) **Pond**  
(7) Show any (\*): (\*) **Wetlands**; or (\*) **Slopes over 20%**

See Attached Map

Please complete (1) – (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	154 Feet	Setback from the Lake (ordinary high-water mark)	— Feet
Setback from the Established Right-of-Way	163 Feet	Setback from the River, Stream, Creek	— Feet
Setback from the North Lot Line	144 Feet	Setback from the Bank or Bluff	— Feet
Setback from the South Lot Line	220 Feet	Setback from Wetland	— Feet
Setback from the West Lot Line	150 Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the East Lot Line	140 Feet	Elevation of Floodplain	— Feet
Setback to Septic Tank or Holding Tank	— Feet	Setback to Well	— Feet
Setback to Drain Field	— Feet		
Setback to Privy (Portable, Composting)	— Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwellings: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

<b>Issuance Information (County Use Only)</b>		Sanitary Number:	# of bedrooms:	Sanitary Date:
Permit Denied (Date):		Reason for Denial:		
Permit #: 17-0304		Permit Date: 8-11-17		
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Deed of Record) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Fused/Contiguous Lot(s)) <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Mitigation Required Mitigation Attached	<input type="checkbox"/> Affidavit Required Affidavit Attached
Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #: NA		Previously Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #: NA		
Was Parcel Legally Created Was Proposed Building Site Delineated		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner Was Property Surveyed	
Inspection Record: Temp. Road Project. Will Last for duration of Road Project only. OK to issue LV Permit.		Zoning District (AS1) Lakes Classification (—)		
Date of Inspection: 8/14/17		Inspected by: Robert Schuman		
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No – (if No they need to be attached)				
For Conditions of Zoning Committee Approval				
Signature of Inspector:		Date of Approval: 8/11/17		
Hold For Sanitary: <input type="checkbox"/>		Hold For TBA: <input type="checkbox"/>		Hold For Affidavit: <input type="checkbox"/>
		Hold For Fees: <input type="checkbox"/>		<input type="checkbox"/>



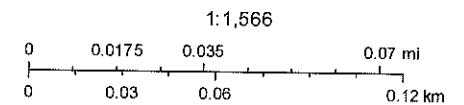
# Bayfield County Web AppBuilder



August 11, 2017

- Building
- Corner Tie Sheets**
  - Section Corner Monument on File
  - Section Corner Monument Referenced on Survey
- Survey Maps**
  - UnRecorded Map

- Recorded Map
- Road Type**
  - CFR
  - County
  - Federal
  - Private
- State
- Town
- Municipal Boundary
- Section Lines
- Approximate Parcel Boundary
- Meander Line
- Tie Line
- Rivers
- Wetlands
- Douglas Co Parcels
- Ashland Co Parcel



Bayfield County  
Bayfield



City, Village, State or Federal  
Permits May Also Be Required

LAND USE - X  
SANITARY - None

SIGN -

SPECIAL -

CONDITIONAL - X (ZC Mtg: 7/20/2017)

BOA -

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT  
ON THE PREMISES DURING CONSTRUCTION

No. **17-0324** Issued To: **Town of Barksdale / Dennis Pocernich, Agent**

Par in

Location: **NW** ¼ of **NW** ¼ Section **35** Township **48** N. Range **5** W. Town of **Barksdale**

Gov't Lot	Lot	Block	Subdivision	CSM#
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For: **Commercial Principal Structure: [ Paving-batch Plant (temporary rock crushing operation) ]**  
(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Per conditions of Zoning Committee approval. Committee Conditions: 1] silt fencing be placed easterly and Southerly of the plant. 2] permit is valid until the completion of the Ondossagon Rd.

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

**Rob Schierman**

Authorized Issuing Official

**August 11, 2017**

Date